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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/814,352 03/21/2001 PAT 6,619,604

*fw*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none fw*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 10/28/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 5	TOTAL CLAIMS 2520	INDEPENDENT CLAIMS 86
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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TITLE  
 Holder for supporting a cleaning utensil

FILING FEE  RECEIVED 589	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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